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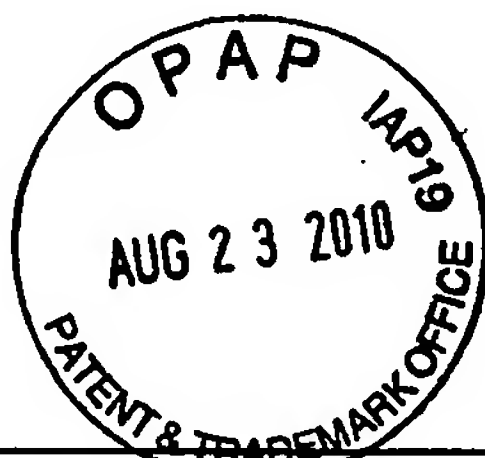
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7590

07/23/2010

YANKWICH & ASSOCIATES
 201 Broadway
 Cambridge, MA 02139



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Meghan F. McFadden

(Depositor's name)

(Signature)

August 20, 2010

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/559,758

03/03/2006

Stephen Lewis Hart

ABL-012.1P US

1570

TITLE OF INVENTION: PEPTIDE LIGANDS

08/24/2010 AWOHDAF2 00000035 10559758

01 FC:2501

755.00 OP

02 FC:1504

300.00 OP

03 FC:0001

36.00 OP

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$755	\$300	\$0	\$1055	10/25/2010

EXAMINER	ART UNIT	CLASS-SUBCLASS
BRADLEY, CHRISTINA	1654	514-017000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Leon R. Yankwich

2 David G. O'Brien

3 Yankwich & Associates,

PC

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

ICH PRODUCTIONS LIMITED

LONDON, UNITED KINGDOM

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☐ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

☒ Issue Fee \$755☒ Publication Fee (No small entity discount permitted) \$300☒ Advance Order - # of Copies 12 x \$3 = \$36

4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

☒ A check is enclosed. (\$1091 - check #9435)☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-0268 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Date August 20, 2010

Typed or printed name David G. O'Brien

Registration No. 46,125

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